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UNITED STATES DEPARTMENT OF AGRICULTURE  
FARM SECURITY ADMINISTRATION  
HEALTH SERVICES PROGRAM

Activities of County, District and State Units, April - June, 1944

Resume of Membership Totals as of June 30, 1944

	<u>Units</u>	<u>Counties</u>	<u>Families</u>	<u>Persons</u>
Physicians' and surgeons' service only	592	782	54,546	281,129
or in connection with other types of service				
Hospital service offered separately	57	319	19,450	103,431
Physicians' and hospital service	649	1,101	73,996	384,560
Less physicians' and hospital duplications*	(40)	180	9,571	54,444
Total physicians' and hospital service	649	921	64,425	330,116
Surgical service offered separately	5	62	3,085	18,712
Physicians', hospital and surgical service	654	983	67,510	348,828
Dental service offered separately	195	219	16,529	85,577
Physicians', hospital, surgical, and dental service	849	1,202	84,039	434,405
Less dental duplications*	(163)	190	13,641	70,962
U. S. Total - (excluding duplications)	849	1,012	70,398	363,443
representing 39 states and Puerto Rico				

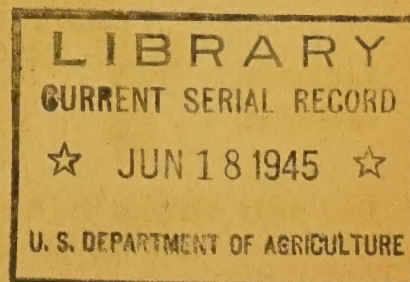
\*In counties having two or more separate units offering different types of service, the membership of the smaller unit or units has been deducted on the assumption that these families also held membership in the larger unit.

Extent of Program

At the end of June, 1944, the FSA health services program had a total of:-

849 units in  
1,012 counties in  
39 states, and Puerto Rico with  
70,398 families and  
363,443 persons holding membership

Of these 849 units, the number of units offering each of the different types of service with the number of counties involved, the number of families and persons to whom each type of service is available, and the percentage of the total membership which these families represent is shown below.





<u>Service</u>	<u>Units</u>	<u>Counties</u>	<u>Families</u>	<u>Persons</u>	<u>Per cent of Total Families</u>
Physicians'	592	782	54,546	281,129	77.5
Surgeons':					
Separate or with hospital	33	145	9,780	53,150	13.9
With physicians'	331	461	30,721	154,218	43.6
	<u>364</u>	<u>606</u>	<u>40,501</u>	<u>207,368</u>	<u>57.5</u>
Hospital:					
Separate or with surgeons'	57	319	19,450	103,431	27.6
With physicians'	271	380	26,554	134,777	37.7
With physicians'	<u>328</u>	<u>699</u>	<u>46,004</u>	<u>238,208</u>	<u>65.3</u>
	<u>328</u>	<u>699</u>	<u>46,004</u>	<u>238,208</u>	<u>65.3</u>
Drug: With physicians'	181	214	19,433	102,807	27.6
Dental:					
Separate	195	219	16,529	85,577	23.5
With physicians'	68	98	7,049	35,397	10.0
	<u>263</u>	<u>317</u>	<u>23,578</u>	<u>120,974</u>	<u>33.5</u>

The distribution by states of the units offering physicians' and surgeons', hospital, drug, and dental services, separately or combined with physicians' service, as well as the counties involved and membership totals as of June 30, 1944, is shown in Table 3.

Changes in membership totals during the quarter and during the year ending June 30, 1944

Shown below are the membership totals at the end of June, 1943, March, 1944, and June, 1944 for units offering physicians', surgeons', hospital and dental services and all services taken together and the increase or decrease in the numbers of units, counties and families during the quarter and during the year.

			<u>Physicians' Service</u>					
	<u>Units</u>	<u>Counties</u>	<u>Families</u>		<u>Units</u>	<u>Counties</u>	<u>Families</u>	
3-31-'44	681	893	70,675	6-30-'43	763	1,009	90,111	
6-30-'44	592	782	54,546	6-30-'44	592	782	54,546	
	<u>-89</u>	<u>-111</u>	<u>-16,129</u>		<u>-171</u>	<u>-227</u>	<u>-35,565</u>	

Per cent change in membership:

during the quarter; -22.8

during the year; -39.5

Surgeons' Service (Separate or with Hospital Service)

	<u>Units</u>	<u>Counties</u>	<u>Families</u>		<u>Units</u>	<u>Counties</u>	<u>Families</u>	
3-31-'44	40	109	9,538	6-30-'43	31	70	7,156	
6-30-'44	33	145	9,780	6-30-'44	33	145	9,780	
	<u>-7</u>	<u>+36</u>	<u>+242</u>		<u>+2</u>	<u>+75</u>	<u>+2,624</u>	

Per cent change in membership:

during the quarter; +25.4

during the year; +36.7



Hospital Service (Separate or with Surgeons' Service)

	Units	Counties	Families		Units	Counties	Families
3-31-'44	59	237	17,811	6-30-'43	45	139	12,877
6-30-'44	57	319	19,450	6-30-'44	57	319	19,450
	-2	+82	+1,639		+12	+180	+6,573

Per cent change in membership:

during the quarter; +9.2

during the year; +51.0

Separate Dental Service

	Units	Counties	Families		Units	Counties	Families
3-31-'44	209	233	23,817	6-30-'43	210	233	27,443
6-30-'44	195	219	16,529	6-30-'44	195	219	16,529
	-14	-14	-7,288		-15	-14	-10,914

Per cent change in membership:

during the quarter; -30.6

during the year; -39.8

All Services (Omitting Duplications)

	Units	Counties	Families		Units	Counties	Families
3-31-'44	951	1,066	86,537	6-30-'43	1,018	1,120	101,098
6-30-'44	849	1,012	70,398	6-30-'44	849	1,012	70,398
	-102	-54	-16,139		-169	-108	-30,700

Per cent change in membership:

during the quarter; -18.6

during the year; -30.4

The above record shows losses in membership for the quarter and for the year for units offering physicians' service and dental service, and for all units taken together. The greatest loss both for the quarter and for the year is shown for units offering physicians' service. For the quarter their loss was 22.8 per cent of the membership at the beginning of the quarter, and for the year it was 39.5 per cent. Units offering surgical and hospital services increased their membership 25.4 per cent and 9.2 per cent respectively during the quarter and 36.7 per cent and 51 per cent respectively during the year. As is shown in Part 3 of Table 3, these units offering surgical service are found in Regions IV, VI, and VIII and the units offering hospital service in these three regions and in addition in Regions I, V, X, and XI.

The percentage gains and losses for the year ending June 30, 1944, and their distribution through the four quarters for each type of service and for all services taken together are shown below:

Percentage change in membership (families) by quarters during the year ending June 30, 1944

Service	Entire year	Quarter			
		1st	2nd	3rd	4th
Physicians'	-39.5	-6.9	-5.1	-11.6	-17.9
Surgeons', alone or with hospital	+36.7	+19.5	+5.1	+ 8.4	+ 3.4
Hospital, alone or with surgery	+51.0	+ 1.8	+6.6	+29.9	+12.7
Dental only	-39.8	+ 3.1	- .7	-15.6	-26.6
All services (omitting duplications)	-30.4	- 6.7	-1.1	- 6.6	-16.0



It is to be noted that the percentages shown above for the different quarters are all based on the membership at the beginning of the year and that on this account these percentages for the fourth quarter differ from those shown earlier, the earlier ones being based on the membership at the beginning of that quarter.

This distribution of the change in membership by quarters shows a constant, though irregular, gain throughout the year for units offering surgeons' and hospital service either alone or together. For units offering dental service only a slight gain was shown during the first quarter of the year, but a slight loss was shown for the second quarter and rapidly mounting losses for the third and fourth quarters, totaling a 39.8 per cent loss for the year. Units offering physicians' service also show most of their losses during the latter half of the year and more particularly in the fourth quarter. The total loss for the year of 39.5 per cent is almost identical with the 39.8 per cent shown for units offering dental service. In considering the high percentage of loss shown for the fourth quarter for both these types of units, it should be noted that some of the units reported as discontinued in the fourth quarter may have actually been discontinued earlier in the year but failed to be reported as discontinued until the end of the year when the information was submitted as a part of the annual report. This factor, however, should not materially affect the percentages shown.

Since most of the membership in the health services program is in these two types of unit offering physicians' and dental services, the losses by these units outweigh the gains by units offering surgical and hospital services, with the result that all units taken together show losses closely paralleling those for the units offering physicians' and dental services. The loss for the year for all units taken together totaled 30.4 per cent, with 16 per cent, more than half of this total, shown for the fourth quarter. The comparable loss for all units during the year ending June 30, 1943, was 13.9 per cent.

A distribution by region of the changes during the year in the number of units, counties and families holding membership and the percentage change in membership for 1943-44 and also for 1942-43 is shown in Table 1. A net loss of 169 units is shown for the year. Region IX shows a gain of one unit. All other regions show losses ranging from two for Region II to 42 for Region III. The loss in counties totaled 108. Regions VIII and IX show gains of 16 and three counties respectively. Regional losses ranged from two in Region II to 45 in Region III. Loss in families is shown by all regions except Region IX which had a gain of 112 families or 6.5 per cent. Regional losses ranged from 2.0 per cent for Region IV to 64.2 per cent for Region III. Region VII also showed a loss of 50.9 per cent. This region and Region III are the only two regions showing a loss in excess of 50 per cent.

A major factor contributing to this loss in membership is the reduction in FSA rolls, which diminished the size of the group from which the health service units draw their membership. The percentage loss among FSA active standard borrowers during the year 1943-44 in each region is shown in Table 1 to the right of the column listing corresponding percentage loss in membership of health service units. In using these percentages representing reduction in FSA rolls, it is to be noted that they refer to groups which typify but do not



Table 1. Change in the total number of health service units, number of counties represented and total of families holding membership during the fiscal year 1943-44 for each FSA region and percentage change in number of member-families and in number of FSA active standard borrowers during the fiscal year 1942-43 and 1943-44.

Region	June 30, 1943			June 30, 1944			Increase or decrease			Per cent change			
	Units	Counties	Families	Units	Counties	Families	Units	Counties	Families	Member-families 1943-44	FSA borrowers 1943-44	Member-families 1942-43	FSA borrowers 1942-43
U.S1	1,018	1,120	101,098	849	1,012	70,398	-169	-108	-30,700	-30.4	-32.3	-13.9	-10.6
Region I	29	79	2,878	24	58	2,035	- 5	- 21	- 843	-29.3	-22.6	42.6	-11.0
II	6	6	457	4	4	278	- 2	- 2	- 179	-39.2	-21.8	-42.8	-18.7
III	82	92	4,728	40	47	1,693	- 42	- 45	- 3,035	-64.2	-30.5	-35.3	-13.7
IV	129	181	11,042	103	224	10,826	- 26	43	- 216	- 2.0	-33.8	33.2	- 3.2
V	296	212	29,400	263	183	17,205	- 33	- 29	-12,195	-41.5	-49.2	-24.5	-22.9
VI	225	160	26,867	204	152	19,031	- 21	- 8	- 7,836	-29.2	-33.9	-15.5	-10.6
VII	28	81	3,194	19	56	1,568	- 9	- 25	- 1,626	-50.9	-25.6	-54.3	-16.5
VIII	116	127	10,292	111	143	8,897	- 5	- 16	- 1,395	-13.6	-24.2	9.7	- .3
IX	17	26	1,720	18	29	1,832	+ 1	+ 3	+ 112	6.5	-30.0	-20.7	-18.4
X	34	66	3,938	22	54	3,146	- 12	- 12	- 792	-20.1	-25.0	-19.2	- 7.2
XI	22	38	2,134	19	26	1,427	- 3	- 12	- 707	-33.1	-27.4	5.4	-15.9
XII	33	51	4,405	21	35	2,417	- 12	- 16	- 1,988	-45.1	-28.0	18.5	-13.1
XIII	1	1	43	1	1	43	0	0	0	0	-31.4	0	204.8



exactly define the groups from which membership in health service groups is drawn. They refer to FSA borrowers in all counties regardless of whether or not the counties had health service groups. Counties having health service groups in each region are, however, sufficiently typical of the region as a whole for these percentages representing the entire region to apply for them. These percentages also represent losses in FSA rolls of active standard borrowers only while health associations memberships are also drawn to some extent from other groups as well. However, the proportion of the membership which is drawn from this active standard borrower group is so large that it is a very dominant factor in determining the size of the group eligible for membership in health service groups.

The 32.3 per cent loss among FSA active standard borrowers for all regions in 1943-44 (Table 1) is slightly larger than the 30.4 per cent loss in membership of health service groups. While these percentages for all regions taken together are quite similar, little if any correlation seems to exist in their variation from region to region, indicating that other factors also operated to augment or diminish the effect of the reduction in FSA rolls on the membership of the health service groups in the different regions. It will be noted that the loss of FSA borrowers is more nearly uniform from region to region than the loss in membership of health service groups. In seven of the regions - Regions IV, V, VI, VIII, IX, X and XIII - the loss in FSA borrowers is in excess of the loss in membership of health service groups.

It is of interest to compare these figures for 1943-44 with the corresponding figures for 1942-43, shown in the last two columns to the right in Table 1. Similarity in the percentage of loss among FSA borrowers and health service groups membership, for all groups taken together is again noted. The wider variation from region to region in change of health service group membership than in change in FSA rolls, already noted for 1943-44, also characterizes this 1942-43 record. Regions IV and VIII show facility in warding off the effects of losses in FSA rolls in both years. In 1942-43 these two regions along with Regions I and XII show actual gains in membership. This situation in both Region IV and Region VIII is due in large measure to their expansion of their hospital service group program.

It is to be noted that this correlation of loss in membership of health service groups and reduction in FSA rolls does not take into account the possibility of families, who have terminated their active standard borrower relationship with the FSA continuing their membership in the health service groups. It is not known to what extent this is being done in the different regions but it is doubtless one of the factors holding the percentage loss in membership of health service groups below the percentage reduction in FSA rolls in the same region.

It has already been noted that loss in membership by the program as a whole during the fiscal year 1943-44 is due to losses sustained by units offering physicians' service alone or with other services and dental service only. Since these physicians' service groups included in their membership 54,546 of the 70,398 families covered by the program on June 30, 1944, it is appropriate to examine more carefully the changes in membership totals for this type of unit during the year. Table 2 shows for each region and state the number of units



Table 2. Change in number of units and number of member-families for medical care units offering physicians' service alone or with other services, during the fiscal year ending June 30, 1944

Region and State	Total units & membership				New units	Dis-continued units	Change in membership when new and discontinued units are -						Per cent of loss due to decrease in FSA rolls	Percentage participation			
	June 30, 1943		June 30, 1944				included			excluded				June 30, 1943	June 30, 1944		
	No. of units	Member-families	No. of units	Member-families			No. of units	Member-families	Per cent	Member-families	Per cent						
All Regions	763	90,111	592	54,546	17	1,075	187	13,532	-271	-35,565	-39.5	-23,108	-25.6	71.7	49.0	41.0	
Region I	23	2,586	17	1,873			6	636	-	6 -	71.3	-27.6	-	77 -	3.0	34.1	39.3
Maine	1	300					1	300	-	1 -	300	-100.0	-	0	0	30.0	-
Maryland	3	167	1	12			2	121	-	2 -	155	-92.8	-	34	-20.4	34.4	11.0
New Hampshire	2	89	1	34			1	39	-	1 -	55	-61.8	-	16	-18.0	26.7	21.9
New Jersey	1	336	1	421					0 +	85 +	25.3 +	+	85	+25.3	100.0	35.1	40.8
New York	6	721	5	561			1	144	-	1 -	160	-22.2	-	16	-2.2	33.3	42.7
Pennsylvania	9	593	8	421			1	32	-	1 -	172	-29.0	-	140	-23.6	39.0	31.3
Vermont	1	380	1	424					0 +	44 +	11.6 +	+	44	+11.6	-	-	54.2
Region II							1	86	-	1 -	143	-36.9	-	57	-14.7	50.4	47.3
Minnesota	3	388	2	245													
Region III	81	4,675	40	1,693			41	1,247	-	41 -	2,982	-66.3	-	1,735	-37.1	31.7	23.5
Illinois	10	489	4	105			6	272	-	6 -	384	-78.5	-	112	-22.9	53.3	18.0
Indiana	4	89	2	26			2	39	-	2 -	63	-70.8	-	24	-27.0	23.1	20.2
Missouri	38	2,700	18	1,030			20	456	-	20 -	1,670	-61.9	-	1,214	-45.0	29.0	20.0
Ohio	29	1,397	16	532			13	480	-	13 -	865	-61.9	-	385	-27.6	35.0	28.5
Region IV	122	8,867	90	5,234	2	246	33	1,810	-	32 -	3,633	-41.0	-	2,069	-23.3	43.4	37.6
Kentucky	15	978	8	200			7	395	-	7 -	778	-77.9	-	383	-39.2	31.5	14.6
North Carolina	31	3,608	29	2,810			2	153	-	2 -	798	-22.1	-	645	-17.9	56.0	53.3
Tennessee	39	2,040	22	890	2	246	19	902	-	17 -	1,150	-56.4	-	494	-24.2	48.0	47.4
Virginia	24	1,686	21	1,077			2	261	-	3 -	609	-36.1	-	348	-20.6	37.2	28.1
West Virginia	13	555	10	257			3	99	-	3 -	298	-53.7	-	199	-35.9	26.3	16.3



Table 2. Change in number of units and number of member-families for medical care units offering physicians' service alone or with other services, during the fiscal year ending June 30, 1944 (continued)

Region and State	Total units & membership				New units		Dis-continued units		Change in membership when new and discontinued units are +						Per cent of loss due to decrease in FSA rolls	Percentage participation	
	June 30, 1943		June 30, 1944						included			excluded				June 30, 1943	June 30, 1944
	No. of units	Member-families	No. of units	Member-families	No. of units	Member-families	No. of units	Member-families	Per cent	Member-families	Per cent						
Region V	166	25,020	137	13,658	1	19	29	3,096	- 29	- 11,362	-45.4	- 8,285	-33.1	70.6	69.6	55.8	
Alabama	37	11,612	30	6,557			7	1,406	- 7	- 5,055	-43.5	- 3,649	-31.4	80.5	82.7	71.8	
Florida	5	296	2	126			3	182	- 3	- 170	-57.4	+ 12	+ 4.1	100.0	26.8	44.4	
Georgia	103	10,346	87	5,521			15	1,022	- 16	- 4,825	-46.6	- 3,803	-36.8	61.6	65.0	48.5	
South Carolina	21	2,766	18	1,454	1	19	4	486	- 3	- 1,312	-47.4	- 845	-30.5	91.5	54.4	50.5	
Region VI	145	23,958	126	15,937			18	1,682	- 19	- 8,021	-33.5	- 6,339	-26.5	79.5	51.7	47.0	
Arkansas	50	7,340	45	4,383			5	562	- 5	- 2,957	-40.3	- 2,395	-32.6	74.1	49.0	41.7	
Louisiana	32	5,431	26	4,136			5	448	- 6	- 1,295	-23.8	847	-15.6	100.0	46.7	48.7	
Mississippi	63	11,187	55	7,418			8	672	- 8	- 3,769	-33.7	- 3,097	-27.7	69.1	57.2	49.9	
Region VII	28	3,194	19	1,568			9	1,050	- 9	- 1,626	-50.9	- 576	-18.0	100.0	32.0	32.9	
Kansas	10	1,001	7	543			3	246	- 3	- 458	-45.8	- 212	-21.1	100.0	32.0	34.5	
Nebraska	16	1,384	11	654			5	406	- 5	- 730	-52.7	- 324	-23.4	100.0	36.2	39.3	
South Dakota	2	809	1	371			1	398	- 1	- 438	-54.1	- 40	- 4.9	100.0	27.0	31.1	
Region VIII	98	9,461	92	6,619	11	446	17	1,153	- 6	- 2,842	-30.0	- 2,135	-22.6	54.1	47.9	39.9	
Oklahoma	27	3,484	21	2,261			6	344	- 6	- 1,223	-35.1	- 879	-25.2	80.9	43.7	39.5	
Texas	71	5,977	71	4,358	11	446	11	809	0	- 1,619	-27.1	- 1,256	-21.0	29.5	50.7	40.1	
Region IX	15	1,550	17	1,675	2	331	2	116	+ 2	+ 125	+ 8.1	- 90	- 5.8	100.0	32.4	32.5	
Arizona	2	129	2	116					0	- 13	-10.1	- 13	-10.1	100.0	33.0	81.0	
California	10	763	10	600			2	116	0	- 163	-21.4	- 47	- 6.2	42.4	28.6	21.1	
Utah	3	658	5	959	2	331			+ 2	+ 301	+45.7	- 30	- 4.6	100.0	38.1	49.9	



Table 2. Change in number of units and number of member-families for medical care units offering physicians' service alone or with other services, during the fiscal year ending June 30, 1944 (continued)

[illegible]



and families in physicians' service groups at the beginning and end of the year, the number of new and discontinued units during the year and various other information bearing on their change in membership during the year.

The net loss during the year for all units taken together is shown to be 39.5 per cent, as already noted. For the different regions, this change ranged from a gain of 8.1 per cent for Region IX to a loss of 63.8 per cent for Region III. By states it ranged from a gain of 45.7 per cent for Utah to a loss of 92.8 per cent for Maryland. These changes in membership totals included the changes resulting from adding new units and discontinuing units during the year. It is of interest to find to what extent they are due to this addition and dropping of units and to what extent they are due to gain and loss in membership of units still continuing to operate. When the membership of new and discontinued units is excluded from the gain and loss totals for the year it is found, according to Table 2, that there still remains a loss in membership of 25.6 per cent indicating that almost two-thirds of the total membership loss was due to the reduction in rolls of the units continuing in operation and only one-third to entire units discontinuing operation. The loss in membership of units continuing in operation ranges by region from 3.0 per cent for Region I to 37.1 per cent for Region III and by state from a gain of 11.4 per cent for Vermont to a loss of 72.8 per cent for Oregon. The loss in Oregon was due in part to a reduction in the size of one of its units from four to one county which, since it was a reduction in territory should possibly be classified as discontinuation of part of a unit rather than decrease in membership of a continuing unit. All of the twelve regions showing changes in membership, show decreases for these units continuing in operation through the year and in seven regions these decreases are in excess of the net loss resulting from the establishment and discontinuation of entire units.

Reference has already been made to the relation between these reductions in membership of health service groups and the reduction in FSA rolls. The last two columns in Table 2 show the extent to which FSA families, in the counties having groups offering physicians' service held membership in those groups at the end of June in 1943, and at the end of June in 1944. For the program as a whole this ratio was 49 per cent on June 30, 1943, and 41 per cent on June 30, 1944, indicating that the decline in membership of FSA families in these groups had been greater than the decline in the number of FSA families eligible for membership. Calculations based on these percentages show that if the 49 per cent participation shown for the beginning of the year had been maintained through the year, to the program would still have shown a loss in membership amounting to 71.7 per cent of the actual loss. This percentage of the loss is, therefore, attributed to reduction in FSA rolls.

These percentages are shown in Table 2 for each region and state. Three regions and nine states, all of which had rather low participation percentages at the beginning of the year, show increases in these percentages during the year and their losses in membership, if any, are consequently attributed entirely to reduction in FSA rolls. For Vermont in Region I and all of Region XII the participation percentage for the beginning of the year was not available and so the calculation was not made. Vermont, however, shows an 11.6 per cent increase in membership during the year.



Percentage of membership covered by report on service and charges

Table 3 shows the approved charges for service and volume of service received during April, May, and June, 1944, for those units operating on a fee-for-service basis which reported for this quarter. The membership of these reporting units, for which these figures are given, and the percentage which this membership represents of the total membership in the various groups is given below.

	<u>April</u>		<u>May</u>		<u>June</u>		<u>Average</u>
	<u>Member families</u>	<u>Per cent</u>	<u>Member families</u>	<u>Per cent</u>	<u>Member families</u>	<u>Per cent</u>	<u>Per cent</u>
Physicians' service alone or with other services	37,948	77.9	34,511	75.8	32,952	74.2	76.0
Hospital service separate	14,168	76.0	15,914	79.4	13,208	67.9	74.5
combined	13,481	63.9	13,376	59.1	11,721	58.6	60.5
Dental service separate	13,136	76.2	12,142	76.7	11,515	77.0	76.6
combined	4,000	56.4	3,457	53.3	3,773	55.9	55.2
Drug service	11,925	80.2	11,184	76.3	10,347	74.4	77.0

For the units operating on a capitation basis, Table 2 shows the membership of reporting and non-reporting units, and the payments for service for the reporting units. Figures on volume of service for these units are not available because of the method of operation.

Physicians' and Surgeons' Service

Physicians' and surgeons' office, home and hospital calls for the quarter are shown in Table 3, Part 1, to average 117 calls per thousand persons per month for all regions taken together. This compares closely with the rate of 115 calls reported for the same months in 1943. A comparison for the same quarters of the quarterly rates of the two fiscal years 1942-43 and 1943-44 shows a marked similarity in the quarterly rates throughout the two years, not only for all types of calls taken together but for different types of calls as well. Quarterly call rates for the two years are shown below.

<u>Period</u>	<u>Physicians' and Surgeons' calls per thousand persons per month</u>			
	<u>Total</u>	<u>Office</u>	<u>Home</u>	<u>Hospital</u>
Entire year, 1942-43	110	87	18	5
July - Sept., 1942	113	93	16	4
Oct. - Dec., 1942	101	79	18	4
Jan. - March, 1943	110	85	20	5
Apr. - June, 1943	115	91	19	5
Entire year, 1943-44	112	89	19	4
July - Sept., 1943	118	97	17	4
Oct. - Dec., 1943	104	82	19	3
Jan. - March, 1944	111	85	22	4
April - June, 1944	117	93	20	4



The average rates for each of the two years both for total calls and for each type of call do not differ from each other by more than two calls. The quarter to quarter variations for the two years also are strikingly similar. For total calls and office calls, high rates are observed for the summer quarters, April-June and July-September. A marked drop is then noted for the October-December period followed by a rise during the January-March quarter to a rate closely approximating the average rate for the year. The trend in the home call rate is quite different from that for total and office calls. It is highest during the winter quarter with a slight drop during the April-June period and a further drop to the low rate of the year during the July-September quarter, during which as we have already noted, the rates for total calls and office calls are high. It will be noted that all of these observations apply equally for the 1942-43 and for the 1943-44 fiscal years.

Returning to the record for April-June, 1944, the call rate for the various regions during this quarter, ranged from 174 for Region I to 101 for Region VI. The charges per person eligible for this service averaged 32 cents for all regions and ranged from 67 cents for Region IX, with only one association in Utah reporting, to 27 cents for Region VI. Percentage payment on charges averaged 78.7 per cent for all regions and ranged from 100 per cent for Region II to 563 per cent for Region III.

#### Hospital Service

The number of days of hospitalization rendered during the quarter are shown in Table 3, Parts 2 and 3, to have been 15 days per thousand persons per month for groups offering hospitalization in combination with physicians' service and 24 days for groups offering hospital service only or in combination with surgery. Corresponding rates for all four quarters of the 1943-44 fiscal year are as follows:

<u>Period</u>	<u>No. of days of hospitalization per thousand persons per month</u>	
	<u>Groups offering hospital service: with other</u>	<u>separately</u>
Entire year, 1943-44	13	21
July - Sept., 1943	14	24
Oct. - Dec., 1943	11	19
Jan. - March, 1944	13	17
Apr. - June, 1944	15	24

The deviations from quarter to quarter for the two types of groups are similar but more pronounced for the groups offering hospitalization as their chief service. The difference in rates ranged from four days during the January-March quarter to 10 days during the July-September quarter. The pattern of high rates for the summer months and low rates for the winter months corresponds closely with that for physicians' and surgeons' calls noted above in our discussion of physicians' and surgeons' services.



Groups offering hospitalization in combination with other services are shown to have paid 79.6 per cent on charges averaging 10 cents per month per person eligible for this service (Table 3, Part 2) compared with 89.2 per cent paid on charges averaging 11 cents per month per person by groups offering hospitalization as their chief service (Table 3, Part 3). Charges for surgery offered separately or in combination with hospital service averaged eight cents per month per person eligible for this service and the percentage paid on charges averaged 78.4 per cent (Table 3, Part 3).

### Drug Service

According to Table 3, Part 4, 181 units, with a membership of 19,433 families or 36 per cent of the total membership of the groups offering physicians' and surgeons' service, made special provision to cover the cost of drugs for which extra charges were made by their physicians. These charges averaged six cents per month per person eligible for this service and constituted 17 per cent of the total physicians' and drug charges for these groups. Regional averages ranged from two cents per person constituting 7.1 per cent of the total physicians' and drug charge for Region IV to seven cents per person constituting 23.7 per cent of the total charge in Region VI. Percentages paid on drug charges averaged 85.3 per cent for all regions and ranged from 100 per cent for Region XII to 82.2 per cent for Region V.

Corresponding rates for each of the four quarters of the year are as follows:

Period	Monthly charge per person eligible for service	Per cent paid on charges	Per cent of physicians' and drug charges
Entire year, 1943-44	\$ .05	87.5	14.5
July - Sept., 1943	.06	88.3	14.4
Oct. - Dec., 1943	.04	91.4	12.3
Jan. - March, 1944	.05	84.7	14.9
Apr. - June, 1944	.06	85.3	17.0

The quarter to quarter variation in the monthly charges per person eligible for service corresponds with the variation already noted for physicians' and hospital service, the high point being reached during the summer months followed by a pronounced drop during October, November and December and a return to average during January, February and March. The percentage paid on drug charges and the percentage of physicians' and drug charges which were drug charges each showed a range of not more than six per cent for the four quarters with the former averaging 87.5 per cent and the latter 14.5 per cent for the year.

### Dental Service

Dental service offered in combination with physicians' service (Table 3, Part 5), was rendered to an average of five persons per thousand per month during the quarter and 92.4 per cent was paid on charges averaging three cents per month per eligible person. The corresponding rates for dental



service offered by units providing this service only (Table 3, Part 6) were 18 persons receiving service per thousand per month, and 92.1 per cent payment on charges averaging seven cents per month per eligible person.

These rates for each of the four quarters of the year are as follows:

Period	Groups offering dental service			Separately		
	With other services					
	Monthly charge per person eligible for service	Per cent paid on charges	No. of persons served per thousand persons per month	Monthly charge per person eligible for service	Per cent paid on charges	No. of persons served per thousand persons per month
Entire year 1943-44	\$ .02	92.3	8	\$ .06	93.0	18
July - Sept., 1943	.02	92.7	9	.07	92.5	22
Oct. - Dec., 1943	.02	93.7	8	.06	92.5	17
Jan. - March, 1944	.03	90.7	9	.06	95.7	17
Apr. - June, 1944	.03	92.4	5	.07	92.1	18

The various rates each show an unusual degree of uniformity throughout the four quarters. When the rates for the two types of groups are compared the two rates measuring volume of service indicate that through all four quarters between two and three times as much service was given by units offering only dental service as by units offering this service together with other services. However, the percentages paid on charges in both types of groups are strikingly uniform throughout the year.

Two special programs listed in the membership figures of Table 3 as "non-reporting" are the Southeast Missouri Health Service, Inc., and the Taos County Cooperative Health Association of New Mexico. Reports of their activities have been received but are not included in the table since their programs differ greatly from the other health service plans.

#### Southeast Missouri Health Service, Inc.

The Southeast Missouri Health Service began the quarter with a membership of 866 families consisting of 4,741 persons and ended it with a membership of 642 families consisting of 3,457 persons. This 26 per cent reduction in membership is accounted for by the expiration during the quarter of the membership of 507 families only 233 of whom renewed their membership for another year. Fifty new families were added during the quarter.

Char



Charges and significant rates on volume of service received are as follows:

Service	Charges (or costs)	Per cent payment possible	Charges per month per member (person)	Rate per thousand persons per month
Physicians'	\$5,486.00	62.2	.45	140 calls
Surgeons'	2,097.50	78.6	.17	4 cases
Hospital	1,952.00	100.0	.16	40 days
Dental	1,359.46			
Nursing	2,621.97			
Chronic conditions	368.00			
X-ray and diagnostic	268.50			
Administration	2,668.18			

The per cent payment possible shown above for physicians' and surgeons' services was not the percentage actually paid. For these two types of service an arbitrary fifty per cent payment on charges was made at the end of the quarter and balances of accounts were carried to the end of the year for proportionate payment from balances of funds remaining at that time. Hospital bills were paid in full as indicated.

The 140 physicians' calls per thousand persons per month shown to have been received during the quarter is a marked increase from the rate of 86 calls per thousand persons shown for the previous quarter. It is also well above the rate of 117 calls shown in Table 3, Part 1, for all groups, but below the rate of 158 calls shown in this same table for other health service groups in Missouri. The hospitalization rate of 40 days per thousand persons per month is also a considerable increase over the rate of 23 days for the previous quarter. The rate shown in Table 3 for other associations offering hospital service and physicians' service is 15 days and for associations offering hospital service only is 24 days.

#### Taos County Cooperative Health Association

The membership of the Taos County Cooperative Health Association was 1,100 families consisting of 5,805 persons at the beginning of the quarter and 1,145 families consisting of 6,103 persons at the end of the quarter. Rates indicating the volume of service received during the quarter are as follows:

	Rate per thousand persons per month
Physicians' clinic visits	127
Clinic visits to nurse only	12
Nurses' home visits	20
Hospital admissions	18
Days of hospitalization	51
Dental cases	29



Table 3. Activities of the FSA health services program through county, district and state units based on reports of units for the quarter, April - June, 1944

Part 1. Physicians' and Surgeons' Services

Region and State	Membership as of June 30, 1944				Totals and rates for reporting units only				No. of physicians' and surgeons' calls per month per 1,000 persons in units reporting calls			
	No. of Units	No. of counties	No. of families No. of families	No. of persons	Physicians' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units reporting calls	Office	Home	Hospital	Total
All Regions	592	782	54,546	281,129								
Fee-for-service	502	685	44,385	228,649	\$177,679.28	78.7	\$ .32	489,079	93	20	4	117
Capitation	90	97	10,161	52,480	27,217.44a/							
Region I	17	57	1,873	8,545	9,307.27	90.0	.39	17,467	141	28	5	174
Maryland	b/ 1	1	12	78	5.60	100.0	.07	77	39	0	0	39
New Hampshire	1	1	34	212	138.25	100.0	.22	636	60	5	0	64
New Jersey	1	19	421	1,779	2,148.01	100.0	.38	5,659	145	54	0	198
New York	3	9	467	1,792	3,193.00	94.0	.56	5,726	143	16	8	167
	b/ 2	2	94	425								
Pennsylvania	5	6	252	1,298	2,104.91	91.9	.39	5,369	146	18	7	170
	b/ 3	5	169	910								
Vermont	1	14	424	2,051	1,717.50	67.1	.28					
Region II	2	2	245	1,349	482.37	100.0	.35	1,376	110	3	24	137
Minnesota	b/ 2	2	245	1,349	482.37	100.0	.35	1,376	110	3	24	137
Region III	40	47	1,693	8,715	8,511.75	56.3	.63	10,068	143	16	8	167
Illinois	1	1	42	202	103.00	100.0	.17	606	71	2	0	73
	b/ 3	3	63	276								
Indiana	c/ 1	1	20	127	201.00c/	54.7	.53	381	139	10	3	152
	b/ 1	1	6	32								



Table 3. FSA Health Services Program, April - June, 1944

Part 1. Physicians' and Surgeons' Services

Region and State	Membership as of June 30, 1944				Totals and rates for reporting units only			No. of person-months for units reporting calls	No. of physicians' and surgeons' calls per month per 1,000 persons in units reporting calls			
	No. of units	No. of counties	No. of families	No. of persons	Physicians' approved charges	Per cent paid	Average monthly approved charges per person eligible for service		Office	Home	Hospital	Total
Region III (continued)												
Missouri	10	10	270	1,360	\$2,623.50	53.9	\$ .65	3,579	139	15	4	158
	c/ 3	3	55	255	637.98c/	50.1	.83					
	b/ 5	11	705	3,852								
Ohio	10	11	345	1,717	4,066.77	57.7	.67	5,502	154	18	12	184
	c/ 5	5	176	842	879.50c/	56.9	.55					
	b/ 1	1	11	52								
Region IV	90	117	5,234	30,071	26,269.88	79.9	.30	81,012	82	27	1	110
Fee-for-service	84	111	4,944	28,600	1,228.94a/							
Capitation	6	6	290	1,471	708.05	71.4	.20	3,438	71	12	0	83
Kentucky	7	7	183	1,061	107.68a/							
Cap.	1	1	17	98	14,200.22	83.8	.29	43,594	88	30	-	118
North Carolina	26	28	2,700	15,944	340.32a/							
	b/ 1	1	30	185								
Cap.	2	2	80	461	5,062.30	74.7	.30	13,582	70	22	-	92
Tennessee	21	26	862	4,862	218.64a/							
Cap.	1	1	28	114	5,559.47	72.6	.33	16,681	71	31	1	103
Virginia	19	35	912	5,364	562.30a/							
Cap.	2	2	165	798	1,439.84	91.7	.37	3,717	102	19	6	127
West Virginia	10	14	257	1,184								



Table 3. FSA Health Services Program, April - June, 1944

Part 1. Physicians' and Surgeons' Services

Membership as of June 30, 1944					Totals and rates for reporting units only				No. of physicians' and surgeons' calls per month per 1,000 persons in units reporting calls			
Region and State	No. of units	No. of counties	No. of families	No. of persons	Physicians' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units reporting calls	Office	Home	Hospital	Total
Region V	137	145	13,658	71,804								
Fee-for-service	98	102	8,202	44,060	\$ 39,106.92	70.5	\$ .35	105,057	108	23	2	133
Capitation	39	43	5,456	27,744	14,239.68a/							
Alabama	6	6	1,525	8,069	13,847.35	68.3	.44	28,310	127	21	2	150
Cap. b/	8	8	1,292	6,840								
Cap. b/	7	7	1,696	8,879	8,383.54a/							
Florida	2	4	126	537	518.99	81.1	.32	887	134	5	-	139
Georgia	64	67	3,969	21,506.00	21,622.00	71.7	.32	65,126	100	23	3	126
Cap. b/	9	8	570	3,093								
Cap. b/	13	17	957	5,250	3,236.54a/							
South Carolina	1	1	25	132								
Cap. b/	8	8	648	3,655	3,118.58	70.5	.29	10,734	100	28	2	130
Cap. b/	1	1	72	360								
Cap. b/	6	6	673	3,646	2,619.60a/							
Cap. b/	3	3	61	311								
Region VI	126	130	15,937	83,849								
Fee-for-service	100	103	13,119	68,638	57,727.91	82.9	.27	187,243	81	18	1	101
Capitation	26	27	2,818	15,211	9,437.64a/							
Arkansas	42	43	4,102	21,215	23,184.80	78.9	.32	68,103	86	22	2	110
Cap. b/	3	4	281	1,488	1,061.24a/							
Louisiana	26	26	4,136	21,847	16,673.65	85.8	.25	57,180	880	16	1	97



Table 3. FSA Health Services Program, April - June, 1944

Part 1. Physicians' and Surgeons' Services

No. of pm

No. of physicians' and surgeons' calls per month per 1,000 persons in units reporting calls

Membership as of June 30, 1944					Totals and rates for reporting units only			reporting calls				
Region and State	No. of units	No. of counties	No. of families	No. of persons	Physicians' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units reporting calls	Office	Home	Hospital	Total
Region VI (continued)												
Mississippi	32	34	4,881	25,576	\$17,869.46	85.4	\$ .24	61,960	78	16	0-	94
Cap.	19	19	2,092	11,350	8,376.40a/							
b/	4	4	445	2,373								
Region VII	19	56	1,568	8,115								
Fee-for-service	18	53	1,475	7,692	7,327.20	82.5	.40	18,186	110	12	23	146
Capitation	1	3	93	423								
Kansas	7	24	543	2,799	2,958.34	92.1	.40	7,368	120	16	10	146
Nebraska	7	11	319	1,643	1,771.16	77.5	.35	5,057	141	11	6	158
b/	3	5	242	1,190								
Cap.	1	3	93	423								
South Dakota	1	13	371	2,060	2,597.70	75.0	.45	5,761	70	9	56	135
Region VIII	92	192	103	6,619	31,391							
Fee-for-service	85	96	6,278	29,793	20,911.47	87.1	.34	57,517	92	92	83	109
Capitation	7	7	341	1,598	847.00a/							
Oklahoma	14	14	1,500	7,208	7,027.78	89.0	.32	19,049	113	12	10	135
b/	7	7	761	3,735	46.23a/							
Texas	39	46	2,690	12,605	13,883.69	86.2	.35	38,468	81	8	7	96
b/	25	29	1,327	6,245								
Cap.	3	3	206	987	800.77a/							
b/	4	4	135	611								







Table 3. FSA Health Services Program, April - June, 1944

Part 1. Physicians' and Surgeons' Services

Region and State	Membership as of June 30, 1944				Totals and rates for reporting units only				No. of physicians' and surgeons' calls per month per 1,000 persons in units reporting calls			
	No. of units	No. of counties	No. of families	No. of persons	Physicians' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units reporting calls	Office	Home	Hospital	Total
Region XII	18	35	2,417	12,541	\$2,824.00	58.3	\$.32	3,536	97	9	42	148
New Mexico	3	10	483	2,613	2,486.50	56.8	.31	2,963	93	8	50	151
<u>b/</u>	5	5	1,416	7,688								
Texas	4	5	81	382	337.50	69.7	.47	573	117	16	-	133
<u>b/</u>	6	15	437	1,858								
Region XIII	1	1	43	255								
Capitation	1	1	43	255								
Puerto Rico Cap. <u>b/</u>	1	1	43	255								



Table 3. FSA Health Services Program, April-June, 1944

## Part 2. Hospital Services (Combined with other services)

Region and State	Membership as of June 30, 1944				Totals and rates for reporting units units only			Days hospitalized		
	No. of units	No. of counties	No. of families	No. of persons	Hospital approved charges	Per cent paid	Average monthly approved charges per person eligible for service	Per cent of total physician and hospital charges and hospital charges	No. of person-months covered	No. of days of hospitalization per 1,000 persons per month
All Regions	271	380	26,554	134,777						
Fee-for-service	228	333	20,012	103,885	\$19,260.07	79.6	\$ .10	21.3	153,405	15
Capitation	43	47	6,542	30,892	3,734.92a/					
Region I	2	7	335	1,292	1,701.45	97.7	.48	44.0	3,305	110
New York	1	6	283	1,060	1,701.45	97.7	.48	44.0	3,305	110
b/	1	1	52	232						
Region III	1	6	642	3,457						
Missouri	b/	1	642	3,457						
Region IV	24	32	935	5,056						
Fee-for-service	22	30	770	4,258	1,624.05	55.9	.12	25.0	9,751	14
Capitation	2	2	165	798	106.00a/					
North Carolina	1	1	24	125	45.00	43.3	.12	47.4	d/	d/
Virginia	11	15	489	2,949	1,138.06	50.5	.12	25.2	7,187	14
Cap.	2	2	165	798	106.00a/					
West Virginia	10	14	257	1,184	440.99	70.9	.12	23.4	2,564	13
Region V	111	117	12,617	66,138	6,059.50	58.7	.07	14.4	79,922	6
Fee-for-service	82	86	7,486	40,162	6,059.50	58.7	.07	14.4	79,922	6
Capitation	29	31	5,131	25,976	2,474.18a/					
Alabama	8	9	1,525	8,069	2,184.16	57.6	.12	13.6	19,567	6
b/	5	5	1,183	6,240						
Cap.	7	7	1,696	8,879	849.86a/					
b/	7	7	1,990	9,251						



Part 2. Hospital Services (Combined with other services)

Totals and rates for reporting units											Days hospitalized	
units only												
Membership as of June 30, 1944												
Region and State		No. of units	No. of counties	No. of families	No. of persons	Hospital approved charges	Per cent paid	Average monthly approved charges per person eligible for service	Per cent of total physicians', sur- geons' and hospital charges	No. of person-months for units covered	No. of days of hospitalization per 1,000 persons per month	
Region V (continued)						\$		\$		d/	d/	
Florida		1	1	92	362	40.00	100.0	.04	14.0			
Georgia		53	56	3,577	19,341	3,347.49	55.3	.05	14.8	51,660	5	
Cap.	b/	8	8	558	3,027							
		10	12	804	4,403	1,117.72a/						
	b/	1	1	25	132							
South Carolina		7	7	551	3,123	487.85	83.3	.06	15.5	8,695	12	
Cap.		3	3	594	3,186	506.60a/						
	b/	1	1	22	125							
Region VI		2	2	350	1,779							
Fee-for-service		1	1	214	1,070	162.50	90.7	.07	24.2	7a/	d/	
Capitation		1	1	136	709	96.55a/						
Arkansas	Cap.	1	1	136	709	96.55a/						
		1	1	214	1,070	162.50	90.7	.07	24.2	d/	d/	
Mississippi		1	1	214	1,070	162.50	90.7	.07	24.2			
Region VII		19	61	1,568	8,115							
Fee-for-service		18	57	1,475	7,692	2,344.80	100.0	.13	24.2	16,647	28	
Capitation		1	4	93	423	625.19a/						
Kansas		7	24	543	2,799	552.35	100.0	.07	15.7	6,484	14	
		7	15	319	1,643	368.35	100.0	.07	17.2	4,402	14	
	b/	3	5	242	1,190							
Cap.		1	4	93	423	625.19a/						
		1	13	371	2,060	1,424.10	100.0	.25	35.4	5,761	56	
South Dakota		1	13	371	2,060	1,424.10	100.0	.25	35.4	5,761	56	



Table 3. FSA Health Services Program, April-June, 1944

## Part 2. Hospital Services (Combined with other services)

Membership as of June 30, 1944					Totals and rates for reporting units only				Days hospitalized	
Region and State	No. of units	No. of counties	No. of families	No. of persons	Hospital approved charges	Per cent paid	Average monthly approved charges per person eligible for service	Per cent of total physicians', surgeons' and hospital charges	No. of person-months for units covered	No. of days of hospitalization per 1,000 persons per month
Region VIII	60	69	4,587	22,153						
Fee-for-service	56	65	4,354	21,049	\$4,912.48	86.7	\$.10	25.2	37,940	18
Capitation	4	4	233	1,104	176.00a/					
Oklahoma	7	7	916	4,184	2,009.02	95.0	.15	35.2	8,911	30
Texas	b/ 4	4	480	2,394						
	27	33	1,956	9,378	2,903.46	80.9	.08	21.0	29,029	14
	b/ 18	21	1,002	5,093						
	Cap. 2	2	145	726	176.00a/					
	b/ 2	2	88*	378						
Region IX	15	24	1,357	6,006						
Fee-for-service	11*	21	828	3,357						
Capitation	4	3	529	2,649	257.00a/					
Arizona	Cap. 1	1	94	428	257.00a/					
	b/ 1	0	22	103						
California	b/ 10	18	600	2,317						
Utah	b/ 1	3	228	1,040						
	Cap. b/ 2	2	413	2,118						
Region X	12	15	970	4,501						
Fee-for-service	9	12	758	3,405						
Capitation	3	3	212	1,096						
Colorado	b/ 9	12	758	3,405						
Wyoming	Cap. b/ 3	3	212	1,096						



Table 3. FSA Health Services Program, April-June, 1944

## Part 2. Hospital Services (Combined with other services)

Membership as of June 30, 1944					Totals and rates for reporting units only				Days hospitalized	
					Hospital approved charges	Per cent paid	Average monthly approved charges per person eligible for service	Per cent of total physicians', surgeons' and hospital charges	No. of person-months for units covered	No. of days of hospitalization, per 1,000 persons per month
Region and State	No. of units	No. of counties	No. of families	No. of persons						
Region XI	14	22	1,030	4,820	\$1,248.04	100.0	.25	28.7	5,058	44
Idaho	1	1	41	215	485.66	100.0	.42	28.6	1,164	101
	b/ 7	11	446	2,182						
Oregon	b/ 2	3	226	1,003						
Washington	2	4	117	502	762.38	100.0	.20	28.7	3,894	28
	b/ 2	3	200	918						
Region XII	10	24	2,120	11,205	1,207.25	100.0	.17	35.0	d/	d/
New Mexico	1	7	417	2,280	1,207.25	100.0	.17	36.1	d/	d/
	b/ 5	5	1,416	7,688						
Texas	1	2	29	129	0	-	0	-	d/	d/
	b/ 3	10	258	1,108						
Region XIII	1	1	43	255						
Capitation	1	1	43	255						
Puerto Rico	Cap. b/ 1	1	43	255						







Table 3. FSA Health Services Program, April-June, 1944

Part 3. Separate Hospital Service and Surgical Service

Membership as of June 30, 1944					Totals and rates for reporting units only			Days Hospitalized		Surgical service-separate or with hospitalization	
Region and State	No. of units	No. of counties	No. of families	No. of persons	Hospital approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units covered	No. of days of hospitalization per 1,000 persons per month	Charges -special-Surgeons'-approved charges	Charges per person eligible for hospitalization
Region X	2	13	587	2,848							
Colorado	b/ 1	8	531	2,609							
Montana	b/ 1	5	56	239							
Region XI	1	3	354	1,122							
Oregon XI	b/ 11	3	354	1,122							



Table 3. FSA Health Services Program, April-June, 1944

Part 4. Drug Service

Membership as of June 30, 1944					Totals and rates for reporting units only			
Region and State	No. of units	No. of counties	No. of families	No. of persons	Druggists' approved charges	Per cent paid	Approved monthly charges per person eligible for service	Per cent of total physicians' and druggists' charges
All Regions	181	214	19,433	102,807				
Fee-for-service	132	162	13,915	73,754	\$11,375.52	85.36	\$ .06	17.0
Capitation	49	52	5,518	29,053	1,499.09a/			
Region I	1	1	12	78				
Maryland b/	1	1	12	78				
Region IV	5	6	129	666				
Fee-for-service	4	5	112	568	32.95	92.0	.02	3.8
Capitation	1	1	17	98				
Kentucky	1	1	21	118				
Cap.	1	1	17	98				
Tennessee	1	1	21	105	8.75	100.0	.02	7.1
Virginia	1	1	12	55	24.20	89.2	.15	21.0
West Virginia	1	2	58	290	0			
Region V	89	91	8,637	46,417				
Fee-for-service	63	63	5,447	29,712	5,196.98	82.2	.06	15.5
Capitation	26	28	3,190	16,705	418.86a/			
Alabama	7	7	1,105	6,353	780.09	91.0	.03	7.9
b/	1	1	540	2,700				
Cap.	5	5	1,323	6,909	96.10a/			
b/	3	3	356	1,593				
Georgia	41	41	2,723	14,616	3,411.18	79.8	.07	17.4
b/	5	5	359	2,028				
Cap.	8	10	775	4,114	283.01a/			
b/	1	1	25	132				



Table 3. FSA Health Services Program, April-June, 1944

Part 4. Drug Service

Totals and rates for reporting units only

Membership as of June 30, 1944

Region and State	No. of units	No. of counties	No. of families	No. of persons	Druggists' approved charges	Per cent paid	Approved monthly charges per person eligible for service	Per cent of total physicians' and druggists' charges
Region V (continued)								
South Carolina	8	8	648	3,655	\$ 1,005.71	83.6	\$ .09	24.4
b/	1	1	72	360				
Cap.	6	6	673	3,646	39.75a/			
b/	3	3	61	311				
Region VI	40	41	5,842	30,832				
Fee-for-service	24	25	3,968	20,756	44,456.01	84.4	.07	23.7
Capitation	16	16	1,874	32,238	891.41a/			
Arkansas	2	2	349	1,735	0			
Mississippi	22	23	3,619	19,021	4,456.01	84.4	.08	26.2
Cap.	14	14	1,590	8,670	891.41a/			
b/	2	2	284	1,406				
Region VII	15	31	1,245	6,470	846.15	96.7	.06	12.7
Kansas	5	6	389	1,961	395.58	100.0	.07	17.0
Nebraska	6	7	243	1,259	228.97	99.6	.06	15.1
b/	3	5	242	1,190				
South Dakota	1	13	371	2,060	221.60	87.5	.04	7.9
Region VIII	9	9	506	2,482				
Fee-for-service	8	8	445	2,221	202.36	95.6	.04	12.7
Capitation	1	1	61	261	80.24a/			
Oklahoma	3	3	94	491	105.18	91.5	.06	18.1
b/	2	2	135	636				
Texas	2	2	125	619	97.18	100.0	.03	9.6
b/	1	1	91	475				
Cap.	1	1	661	261	80.24a/			



Table 3. FSA Health Services Program, April-June 1944

Part 4. Drug Service

Totals and rates for reporting units only

Membership as of June 30, 1944

Region and State	No. of units	No. of counties	No. of families	No. of persons	Druggists' approved charges	Per cent paid	Approved monthly charges per person eligible for service	Per cent of total physicians' and druggists' charges
Region IX	4	6	464	2,242				
Fee-for-service	2	3	250	1,143				
Capitation	2	3	214	1,099	\$ 108.58a/			
Arizona Cap.	1	1	94	428	108.58a/			
b/	1	0	22	103				
Utah b/	1	3	228	1,040				
Cap. b/	1	2	120	671				
Region X	3	3	163	757				
Fee-for-service	1	1	44	198				
Capitation	2	2	119	559				
Colorado b/	1	1	44	198				
Wyoming Cap. b/	2	2	119	559				
Region XI	8	13	538	2,525	233.88	95.1	\$ .05	7.9
Idaho b/	3	4	185	957	63.74	100.0	.12	7.1
Oregon b/	1	2	36	148				
Washington	2	4	117	502	170.14	93.3	.04	8.2
b/	2	3	200	918				
Region XII	6	12	1,854	10,083	406.19	100.0	.05	15.7
New Mexico	1	7	417	2,280	406.19	100.0	.06	16.0
b/	4	4	1,402	7,628				
Texas	1	1	35	175	0			
Region XIII	1	1	43	255				
Capitation	1	1	43	255				
Puerto Rico Cap. b/	1	1	43	255				



Table 3. FSA Health Services Program, April-June, 1944

Part 5. Dental Service (Combined with other services)

Membership as of June 30, 1944					Totals and rates for reporting units only				
Region and State	No. of units	No. of counties	No. of families	No. of persons	Dentists' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units reporting persons served	No. of persons served per 1,000 persons per month
All Regions	68	98	7,049	35,397	\$15,714.737	92.4	\$ .03	46,072	5
Fee-for-service	63	93	6,751	33,875	126.25a/				
Capitation	5	5	298	1,522	47.50	100.0	.04	1,170	7
Region III	2	7	729	3,847					
Missouri b/	1	6	642	3,457	47.50	100.0	.04	1,170	7
Ohio	1	1	87	390	64.00	86.3	.02	2,642	3
Region IV	5	11	175	921	7.00	100.0	.00+	1,815	2
Tennessee	4	5	98	511	57.00	84.6	.05	827	6
Virginia	1	6	77	410					
Region V	2	2	563	2,532					
Alabama	1	1	420	1,716					
Georgia	1	1	143	816					
Region VI	1	1	84	524					
Louisiana	1	1	84	524	112.00	100.0	.01	13,387	3
Region VII	13	29	1,086	5,755	60.00	100.0	.01	4,357	3
Kansas	4	5	281	1,501	6.00	100.0	.00+	3,269	1
Nebraska	5	6	192	1,004					
b/	3	5	242	1,190					
South Dakota	1	13	371	2,060	46.00	100.0	.01	5,761	3



Table 3. FSA Health Services Program, April-June, 1944

Part 5. Dental Service (Combined with other services)

					Totals and rates for reporting units only				
Membership as of June 30, 1944									
Region and State	No. of units	No. of counties	No. of families	No. of persons	Dentists' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person- months for units reporting persons served	No. of persons served per 1,000 persons per month
Region VIII	41	44	2,997	14,357					
Fee-for-service	37	40	2,823	13,468	\$1,490.87	91.8	\$ .05	28,873	6
Capitation	4	4	174	889	126.25a/				
Oklahoma	7	7	859	4,129	499.12	96.4	.04	11,429	6
b/	2	2	135	636					
Texas	17	20	1,161	5,509	865.50	88.0	.05	17,444	7
b/	11	11	668	3,194					
Cap.	2	2	145	726	126.25a/				
b/	2	2	29	163					
Region X	2	2	168	831					
Fee-for-service	1	1	44	198					
Capitation	1	1	124	633					
Colorado	b/	1	44	198					
Wyoming Cap.	b/	1	124	633					
Region XI	1	1	105	543					
Idaho	b/	1	105	543					
Region XII	1	1	1,142	6,087					
New Mexico	b/	1	1,142	6,087					



Table 3. FSA Health Services Program, April-June, 1944

Part 6. Separate Dental Service

Region and State	Membership as of June 30, 1944				Totals and rates for reporting units only				
	No. of units	No. of counties	No. of families	No. of persons	Dentists' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units reporting persons served	No. of persons served per 1,000 persons per month
All Regions	195	219	16,529	85,577					
Fee-for-service	177	195	14,950	77,155	\$13,573.45	92.1	\$ .07	171,114	18
Capitation	18	24	1,579	8,422	1,126.29a/				
Region II	2	2	33	110					
Michigan b/	2	2	33	110					
Region IV	4	4	217	1,225	148.17	73.2	.035	2,903	8
North Carolina b/	2	2	45	248					
Virginia	2	2	172	977	148.17	73.2	.05	2,903	8
Region V	119	130	10,442	55,357					
Fee-for-service	104	109	9,173	48,746	7,760.71	91.1	.06	113,932	18
Capitation	15	21	1,269	6,611	912.39a/				
Alabama	18	18	3,150	16,053	3,922.10	95.3	.07	47,990	22
Cap. b/	12	12	1,625	8,463					
	1	1	126	730	210.26a/				
Georgia b/	2	2	437	2,346					
	53	58	2,962	16,199	2,659.75	89.6	.05	47,961	14
Cap. b/	7	7	165	948					
	6	12	238	1,187	335.36a/				
South Carolina b/	2	2	186	967					
	12	12	1,142	6,438	1,178.86	80.4	.07	17,981	16
Cap. b/	2	2	129	645					
	4	4	282	1,381	366.77a/				
Region VI	46	47	4,201	21,504					
Fee-for-service	44	45	3,931	19,895	4,404.97	93.3	.08	50,039	20
Capitation	2	2	270	1,609	213.90a/				
Arkansas	28	28	1,493	7,347	2,478.68	92.7	.10	20,367	28
b/	1	1	45	232					
Louisiana	2	2	302	1,544	274.00	78.5	.06	4,632	18



Table 3. FSA Health Services Program, April-June, 1944

Part 6. Separate Dental Service

Membership as of June 30, 1944					Totals and rates for reporting units only				
Region and State	No. of units	No. of counties	No. of families	No. of persons	Dentists' approved charges	Per cent paid	Average monthly approved charges per person eligi- ble for service	No. of person- months for units reporting per- sons served	No. of persons served per 1,000 persons per month
Region VI (continued)									
Mississippi	11	12	1,644	8,496	\$1,652.29	96.7	\$ .06	25,040	15
<u>b/</u>	2	2	447	2,276					
Cap.	2	2	270	1,609	213.90a/				
Region VIII	15	18	834	3,849					
Fee-for-service	14	17	794	3,647	385.50	88.1	.09	4,240	9
Capitation	1	1	40	202					
Oklahoma	<u>b/</u>	1	73	365					
Texas	6	7	272	1,312	385.50	88.1	.09	4,240	9
<u>b/</u>	7	9	449	1,970					
Cap. <u>b/</u>	1	1	40	202					
Region IX	1	2	157	894					
Utah	<u>b/</u>	2	157	894					
Region X	1	1	55	22					
Colorado	<u>b/</u>	1	5	22					
Region XI	4	4	184	728	580.34	100.0	1.82	d/	d/
Oregon	<u>b/</u>	1	53	232					
Idaho	<u>b/</u>	1	35	158					
Washington	<u>b/</u>	2	96	338	580.34	100.0	1.82	d/	d/
Region XII	3	11	436	1,888	293.76	100.0	.06	d/	d/
New Mexico	1	7	378	1,593	293.76	100.0	.06	d/	d/
Texas	<u>b/</u>	2	78	295					



Table 3. FSA Health Services Program, April-June, 1944

Footnotes

- a/ Payments rather than charges for units operating on a Capitation basis.
- b/ Membership totals for these units have been taken from reports for months other than June.
- c/ These units pay no more than fifty per cent on charges at the end of each month or quarter, delaying further payment until the end of the year. The entry under Per cent paid for these units is the estimated percentage which could be paid if all funds available for payment of bills this month were distributed.
- d/ Information incomplete.



Medical Units

April - June, 1944

Newly Reported

Region IV  
Virginia:

Prince County added to Surry unit

Region V  
Alabama:

Monroe County added to Wilcox unit  
Monroe County added to Wilcox unit

Georgia:

Dade County added to Walker unit

South Carolina:

Lee County

Region VI  
Arkansas:

Izard County added to Sharp unit

Region VII  
Kansas:

Hamilton, Ness, and Kearny Counties  
added to S. W. Kansas unit

Nebraska:

Valley, Custer, and Howard Counties  
added to Sherman unit

Region VIII  
Texas:

Coleman County  
Fayette County  
Karnes County  
Kenedy County added to Willacy unit  
Montgomery County  
Uvalde and Real Counties added to  
Zavala unit

Region IX  
Utah:

Grand County  
Wayne County

Region X  
Montana:

Powder River County added to  
Southeast Montana unit

Region XI  
Idaho:

Payette County

Washington:

Skagit County added to Island-  
Snohomish unit

Region XII  
Texas:

Fisher and Scurry Counties added  
to Nolan unit  
King County added to Cottle unit

Medical Units

April - June, 1944

Discontinued

Region I

Maryland:

Kent - Queen Anne -  
Carolina (a three-county unit)

Maine:

Hancock - Penobscot - Piscataquis -  
Somerset - Washington (a five-county  
unit)

New Hampshire:

Grafton - Cheshire (a two-county unit)

New Jersey:

Covers 19 counties instead of 20 counties  
previously listed

New York:

Chenango County

Pennsylvania:

Washington County

Region III

Missouri:

Camden County  
Laclede County  
Caldwell County dropped from  
Livingston-Caldwell unit  
St. Francis County

Ohio:

Carroll County  
Clarke County  
Fayette County  
Huron-Erie (a two-county unit)  
Morgan County  
Union County

Region IV

Kentucky:

Cumberland County

North Carolina:

Pitt County

Tennessee:

Anderson County  
Benton County  
Clay County  
Decatur County  
DeKalb County  
Greene County  
Hancock County  
Houston County  
Johnson County  
Meigs-McMinn (a two-county unit\*)

Virginia:

Brunswick County dropped as sepa-  
rate unit and added to Greenville-  
Sussex unit

West Virginia:

Doddridge County

Region V

Alabama:

Autauga County  
Cherokee County  
Etowah County  
Henry County  
Madison County  
Marion County discontinued as  
medical plan, continued as hospi-  
tal plan  
Marshall County

Florida:

Alachua County  
Jefferson-Leon (a two-county unit)  
Marion County



Medical Units

April - June, 1944

Discontinued

Region V (continued)

Georgia:

Bacon County  
Calhoun County dropped from the Terrell-Calhoun unit  
Chattooga County  
Clay County dropped from Early-Clay unit  
Cobb County  
Cook, Clinch, Echols, Lanier Counties dropped leaving Lowndes County  
Floyd County  
Habersham County  
Johnson County discontinued as medical plan, continued as hospital plan  
Lee County was a duplicate listing  
Marion-Chattahoochee (a two-county unit)  
Muller County discontinued as separate unit, added to Seminole unit  
Morgan County  
Murray County  
Polk County  
Pulaski dropped from Bleckley-Pulaski unit  
Screven County  
Stewart County  
Stephens County  
Telfair County dropped from Jeff Davis-Telfair unit  
Webster County

South Carolina:

Greenville County  
Chesterfield County  
Clarendon County  
Williamsburg County

Region VI

Arkansas:

Benton County dropped from Washington-Benton unit  
Faulkner County  
Mississippi County  
Stone County  
Stone and Van Buren Counties dropped from Cleburne-Stone-Van Buren unit

Louisiana:

Ascension Parish  
Franklin Parish  
Vernon Parish

Mississippi:

DeSoto County  
Perry County  
Stone County  
Sunflower County

Region VII

Kansas:

Beaver and Texas Counties, (Oklahoma), and Greely and Wichita Counties (Kansas) dropped from S.W. Kansas unit

Nebraska:

Valley-Garfield-Loup-Wheeler (a four-county unit)  
Cass County dropped from Otoe-Cass unit

Medical Units

April - June, 1944

Discontinued

Region VIII

Oklahoma:

Lincoln County  
Marshall County  
Mayes County  
Payne County  
Pittsburg County  
Sequoyah County

Texas:

Camp County  
Collin County  
Falls County  
Freestone County  
Newton County  
Parker County  
Upshur County  
Waller County  
Williamson County

Region XI

Idaho:

Bear Lake County  
Blaine-Lincoln (a two-county unit)  
Bonner County  
Clearwater County dropped from Asotin-  
Garfield-Nez Perce-Whitman unit  
Washington County dropped from Adams-  
Washington unit  
Gem-Boise (a two-county unit)

Washington:

Klickitat County dropped from  
Yakima-Klickitat unit

Oregon:

Snake River association now  
has Malheur County only.

Region XII

New Mexico:

De Baca County  
Grant County  
Guadalupe County  
Roosevelt County  
Torrance County dropped from  
Lincoln-Torrance unit

Texas:

Childress County  
Hansford-Ochiltree-Moore-  
Lipscomb-Beaver-Texas (a  
six-county unit)



Surgical Units

April - June, 1944

Newly Reported

Region IV

North Carolina:

1 unit of the following counties:

Anson County

Bertie

Bladen

Brunswick-Columbus

Chatham

Craven

Cumberland

Duplin

Durham

Franklin

Granville

Greene

Guilford

Halifax

Harnett

Hoke

Hyde-Dare

Iredell

Johnston

Jones

Lee

Lenoir

Madison

Martin

Montgomery-Stanly

Moore

Northampton-Hertford

Onslow-Carteret

Orange

Pamlico

Perquimans-Chowan-Gates

Pender-New Haven

Pitt

Richmond

Robeson

Rockingham

Rutherford

Sampson

Scotland

Stokes

Surry

Union

Vance

Wake

Warren

Washington

Wayne

Wilkes-Alexander

Discontinued

Region IV

North Carolina: Wayne County

Hospital Units

April - June, 1944

Newly Reported

Region I

New York:

Jefferson County

Region IV

North Carolina:

Catawba, Haywood, Lincoln, Polk, and Scotland  
Counties added to Hospital Care Association  
Davidson, Mecklenburg, and Richmond Counties  
added to Hospital Savings Association

Virginia:

1 unit of the following counties:

Albemarle  
Amelia  
Augusta  
Botetourt  
Brunswick  
Campbell  
Caroline  
Carroll  
Charles City  
Charlotte  
Clarke  
Craig  
Culpeper  
Essex  
Fairfax  
Fauquier  
Floyd  
Franklin  
Frederick  
Giles  
Gloucester  
Grayson  
Greensville  
Halifax  
Henry

Isle of Wight  
King and Queen  
King George  
King William  
Lancaster  
Lee  
Loudoun  
Louisa  
Madison  
Mathews  
Mecklenburg  
Middlesex  
Montgomery  
Nansemond  
Nelson  
New Kent  
Northumberland  
Orange  
Page  
Powhatan  
Prince George  
Rappahannock  
Richmond  
Roanoke  
Rockbridge  
Rockingham  
Shenandoah  
Smyth  
Southampton  
Spotsylvania  
Stafford  
Surry  
Sussex  
Warren  
Westmoreland  
Wythe



Hospital Units

April - June, 1944

Newly Reported

Region V  
Georgia:

Johnson County dropped as medical unit,  
continued as hospital unit

Region VI  
Arkansas:

Pulaski County  
Woodruff County

Mississippi:

Clark-Wayne (a two-county unit)

Region VIII  
Oklahoma:

Alfalfa, Blaine, Kay, Logan,  
Oklahoma, Payne Counties  
(a six-county unit)

Region X  
Colorado:

Custer, Fremont, Elbert, El Paso,  
Teller, Washington Counties  
(a six-county unit)

Montana:

Deer Lodge, Granite, Mineral,  
Missoula, Powell Counties  
(a five-county unit)

Discontinued

Region I  
Delaware:

Kent-New Castle-Sussex  
(a ~~three~~-county unit)

Region VI  
Arkansas:

Ashley-Chicot-Desha (a three-county unit)  
Boone County dropped from Benton-Carroll-  
Madison-Washington unit  
Franklin County dropped from Johnson-  
Franklin unit  
Prairie County dropped from Monroe-  
Prairie unit



Dental Units

April - June, 1944

Newly Reported

Region II  
Michigan: Emmet County

Region V  
Alabama: Houston County  
Tallapoosa County

South Carolina: Chester County  
Laurens County

Region VI  
Arkansas: Conway County  
Crawford County  
Saline County

Region VIII  
Oklahoma:

Garvin County

Texas:

Haskell-Stonewall (a two-  
county unit)  
Grimes County  
Live Oak-McMullen (a two-  
county unit)  
Mason County  
Morris County  
San Saba County

Region XIII  
Texas:

King County added to Cottle

Discontinued

Region II  
Michigan: Cheboygan County

Region V  
Alabama: Calhoun County  
Cullman County  
Walker County

Georgia: Banks County  
Barrow County  
Cherokee County  
Clinch and Cook Counties dropped from  
Lowndes-Echols-Lanier unit  
Dawson County  
Pulaski County  
Thomas County  
Turner County dropped from Tift-  
Turner unit  
Webster County

South Carolina:

Colleton County

Region VI  
Arkansas:

Cleburne County  
Crittenden-Cross unit was  
duplicate listing  
Jackson County  
Montgomery County  
Polk County  
Stone County

Louisiana:

Beauregard County  
Ouachita County

Mississippi:

Scott County  
Stone County  
Tippah County  
Yalobusha County



Dental Units

April - June, 1944

Discontinued

Region VIII

Oklahoma:

Sequoyah County

Texas:

Fayette County dropped as separate dental unit,  
added to medical units

Franklin County was a duplicate listing

Jack County was a duplicate listing

Madison County dropped as separate dental unit,  
remains as part of medical unit

Region IX

Utah:

Duchesne County